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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the application of
HOWES, et al

Examiner: Unassigned

Serial No. 09/954,507

Art Unit: 2663

Filed: September 12, 2001

Docket No. CISCP041C1

March 1, 2002

For: METHOD AND APPARATUS
FOR MAINTAINING CONNECTION STATE
BETWEEN A CONNECTION MANAGER
AND A FAILOVER DEVICE

RECEIVED

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CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to:
Assistant Commissioner for Patents, Washington, DC 20231 on

3/18/2002.

Signed: Pat Tate
Pat Tate

PRELIMINARY AMENDMENT A

Assistant Commissioner for Patents
Washington, DC 20231

Dear Sir:

Prior to the examination of the application on the merits, please amend the application as follows:



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2663
PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:) Attorney Docket No.: CISCP041C1
HOWES, et al)
) Examiner: Unassigned
)
Application No.: 09/954,507) Group Art Unit: 2663
)
Filed: September 12, 2001) Date: March 01, 2002
)
For: METHOD AND APPARATUS)
FOR MAINTAINING CONNECTION)
STATE BETWEEN A CONNECTION)
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Signed: Pat Tate
Pat Tate

Assistant Commissioner for Patents
Washington, DC 20231

Sir:

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated as shown below.

Claims

Remaining <u>After Amendment</u>	Highest Previously <u>Paid For</u>	Present <u>Extra</u>	SMALL ENTITY <u>RATE FEE</u>	LARGE ENTITY <u>RATE FEE</u>
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TOTAL

CLAIMS _____ - _____ X9 = \$ OR X18 = \$

INDEP

CLAIMS _____ - _____ X42 = \$ OR X84 = \$

[] Multiple Dependent Claim Present \$140 \$280
and Fee Not Previously Paid

TOTAL \$ _____ \$ 0



Applicant(s) hereby petition for a _____ month(s) extension of time to respond to the outstanding Office Action.

- Applicant(s) believe that no (additional) Extension of Time is required; however, if it is determined that such an extension is required, Applicant(s) hereby petition that such an extension be granted and authorize the Commissioner to charge the required fees for an Extension of Time under 37 CFR 1.136 to Deposit Account No. 50-0685.
- Enclosed is our Check No. _____ in the amount of \$_____ to cover the additional claim fee and/or extension of time fees.
- If the required fees are missing or any additional fees are required during the pendency of the subject application, please charge such fees or credit any overpayment to Deposit Account No. 50-0685 (CISCP041C1).

Respectfully submitted,
VAN PELT & YI LLP

William J. James

William J. James
Registration No. 40,661

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